Case 16-16590 Doc 1 Fill in this information to identify your case:	Filed 05/17/16	Entered 05/17/16 13:43:38 age 1 of 75	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name Write the name that is on	Christopher First name	First name
your government-issued picture identification (for example, your driver's	M Middle name Jackson	Middle name
license or passport Bring your picture	Last name Sr	Last name
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>3463</u>	xxx - xx
Security number or	OR	OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Christo@ase 16-16590 MDoc 1 Filed 05/12/73/016 Entered 05/417/116/113:43:38 Desc Main Debtor 1 Page 2 of 75 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 4014 Euclid Ct Number Number Street Street Richton Park 60471 Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District When Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Christo 6 ase 16-16590 MDoc 1 Filed 05/12/73/016 Entered 05/17/116/113:43:38 Desc Main Debtor 1 Page 4 of 75 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

First Name

Middle Name

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Christo@ase 16-16590 MDoc 1 Filed 05/12/73/01/6 Entered 05/117/116/113:43:38 Desc Main Debtor 1 Page 6 of 75 Document Document **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Christopher Jackson Signature of Debtor 2 Signature of Debtor 1 Executed on 5/17/2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Christo@ase 16-16590 MDoc 1 Filed 05/12/75/016 Entered 05/12/75/016 ill-3:43:38 Desc Main

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| Christo@ase 16-16590 MDoc 1 Filed 05/12/75/016 Entered 05/12/75/016 ill-3:43:43:38 Desc Main

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

rrect.		
/s/ Elizabeth Placek Signature of Attorney for Debtor	Da	ate <u>5/17/2016</u> MM / DD / YYYY
Elizabeth Placek Printed name		
Semrad Law Firm Firm name		
20 S. Clark Street Street		
28th Floor		
Chicago City	Illinois State	60603 Zip Code
Contact phone		Email address eplacek@semradlaw.com
Bar number		State

<u> Case 16-16590 Doc 1 Filed 05/17/16 Fntered 05/1</u>7/16 13:43:38 Desc Main Fill in this information to identify your case: Debtor 1 Christopher Jackson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$8,737.72 1b. Copy line 62, Total personal property, from Schedule A/B \$8,737.72 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

5. Schedule J: Your Expenses (Official Form 106J)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F......

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F......

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22, Column A, of Schedule J.....

Amount you owe

Your total liabilities

\$12,499.00

\$19.484.28

\$31,984.28

\$2,393,47

\$2,382,00

\$1.00

12/15

Debtor 1 Christo Gase 16-16590 MDoc 1 Filed 05/4c7s/d16 Entered 05/4c7s/d16 (d1-3):43:38 Desc Main

Page 9 of 75 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,959.12 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$308.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$308.00

	Case 16-16590		Filed 05/17/16	<u> Entered 05/1</u> 7,	/16 13:43:38	Desc Main
Fill in this	information to identify your case:			L		
Debtor 1	Christopher	M	Jacks	on		
	First Name	Middle	Name Last N	lame		
Debtor 2						
(Spouse,	if filing) First Name	Middle	Name Last N	lame		
United St	ates Bankruptcy Court for the:	Northern	District of II	linois		
			(\$	State)		
Case nun (If known)	nber					
(II KIIOWII)						Check if this is an
Officia	al Form 106A/B					amended filing
		-4. <i>-</i>				-
	dule A/B: Proper tegory, separately list and descriptions.	_				12/1
esponsib rrite your Part 1:	where you think it fits best. Be ble for supplying correct inforn name and case number (if kno Describe Each Residenc u own or have any legal or equ	nation. If more sown). Answer ever e, Building,	space is needed, attach very question. Land, or Other Rea	a separate sheet to this I Estate You Own o	form. On the top of a	nny additional pages,
✓	No. Go to Part 2					
□	Yes. Where is the property?					
_			What is the property	? Check all that apply.		ecured claims or exemptions. Put
1.1	Street address, if available, or o	than description	_ Single-family home	;		y secured claims on Schedule D: Have Claims Secured by Property.
	Street address, if available, or o	iriei description	Duplex or multi-uni	•		, ,
			_ Condominium or co	•	Current value entire property	
			Manufactured or m	obile home		
	Number Street		_ Land	,	Describe the na	ature of your ownership
	Nambor Street		Investment property Timeshare	,	interest (such a	is fee simple, tenancy by
	City State	Zip Code	Other		the entireties, o	or a life estate), if known.
	,	,				
				in the property? Check	one. Check if th	is is community property
			Debtor 1 only			olionoj
			Debtor 2 only Debtor 1 and Debtor	or 2 only		
			-	debtors and another		
				u wish to add about this	s item, such as local	
If you	own or have more than one, list he	ere:				
4.0			What is the property			ecured claims or exemptions. Put by secured claims on <i>Schedule D:</i>
1.2	Street address, if available, or o	ther description	Single-family home			Have Claims Secured by Property.
	. , , , ,	•	Duplex or multi-uni Condominium or co	ŭ	Current value	of the Current value of the
	-		_ Condominium or co	•	entire property	
			Land	Solic Home	_	_
	Number Street		Investment property	/	Describe the na	ature of your ownership
			Timeshare			is fee simple, tenancy by or a life estate), if known.
	City State	Zip Code	Other			
			Who has an interest	in the property? Check	one Chack if th	is is community property
			Debtor 1 only	in the property: Oneck	(see instru	is is community property ctions)
			Debtor 2 only		_	
			Debtor 1 and Debto	or 2 only		
			<u> </u>	debtors and another		
			Other information yo property identification	u wish to add about this	s item, such as local	

Debtor 1	Christo Gase 16-165		Filed 05/127/116 Entered 05/117/116	# 13 38 D €	sc Main
1.3Stre	First Name et address, if available, or oth		Documest hit Page 11 of 75 That is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Nun		Zip Code	Manufactured or mobile home Land Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	of your ownership simple, tenancy by
			Tho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about this item, s	(see instructions	community property s)
you ha	ve attached for Part 1. Writ	ion you own for all c e that number here	operty identification number: of your entries from Part 1, including any entries fo		
Do you ov you own th 3. Cars, va	at someone else drives. If youns, trucks, tractors, sport utili	quitable interest in a lease a vehicle, also r	any vehicles, whether they are registered or not? Increport it on Schedule G: Executory Contracts and Unexpes		
	Make Model: Year: Approximate mileage: Other information: Current Vehicle	Ford Focus SE 2009 105000	Who has an interest in the property? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Claims Current value of the portion you own? \$6425.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?

Debtor 1	Christomase 16-16590 MDoc 1	Filed 05/167616 Entered 05/167/116	6 (143;43: <u>38 Des</u>	c Main	
	First Name Middle Name	Document Page 12 of 75			
3.3	Make	Who has an interest in the property? Check	Do not deduct secured cl	•	
	Model:	one.		ed claims on Schedule D: nims Secured by Property.	
	Year: Approximate mileage:	Debtor 1 only	Creditors Who have Cia	iirns Secured by Property.	
	Approximate mileage.	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
3.4	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.		ed claims on <i>Schedule D:</i>	
	Year:	Debtor 1 only	Creditors Who Have Cla	e Claims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
	Yes				
4.1	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secured claims on Schedule D:		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.		ed claims on Schedule D:	
	Year:	Debtor 1 only	Creditors Who Have Cla	nims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
		II of your entries from Part 2, including any entries t		425.00	
you na	TO attached for Fart 2. Write that humber her	·······			

Debtor 1 Christo Case 16-16590 MDoc 1 Filed 05/1676/16 Entered 05/1676/16 Desc Main
First Name Document Page 13 of 75

Part 3: Describe	Your Personal and Household Items	
Do you own or	have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household god	ds and furnishings	
Examples: Major a	appliances, furniture, linens, china, kitchenware	
☐ No		
Yes. Describe	Used Furniture	\$350.00
7. Electronics		
	ons and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
∐ No		
✓ Yes. Describe	(1)Laptop (1)Desktop (1) Cell phone	\$500.00
8. Collectibles of	المادين مارادين	
	es and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	coin, or baseball card collections; other collections, memorabilia, collectibles	
✓ No		
Yes. Describe		
	sports and hobbies	
	photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes yaks; carpentry tools; musical instruments	
	yaro, carpetraly tools, musical instruments	
Yes. Describe		
10. Firearms		
	rifles, shotguns, ammunition, and related equipment	
✓ No		
Yes. Describe		
11. Clothes		
Examples: Everyd	ay clothes, furs, leather coats, designer wear, shoes, accessories	
∐ No		
Yes. Describe	Used Clothes	\$450.00
40 Janualia		
12. Jewelry Examples: Everyda	ay jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
gold, s		
✓ No		
Yes. Describe		
13. Non-farm anin		
Examples: Dogs,	cats, birds, horses	
✓ No		
Yes. Describe		
	sonal and household items you did not already list, including any health aids you did not list	
✓ No		
Yes. Describe		
15. Add the dollar	value of all of your entries from Part 3, including any entries for pages you have attached	#4000.00
	aat number here	<u>\$1300.00</u>

Debtor 1 Christo@ase 16-16590 MDoc 1 Filed 05/167616 Entered @5/1676166 @43:43:38 Desc Main
First Name Document Page 14 of 75

Describe Your Financial Assets

Do	you own or have a	ny legal or equitable inte	rest in any of the following	?	Current value of the portion you own? Do not deduct secured claims or exemptions.
-	☑ No	e in your wallet, in your home, in a s	afe deposit box, and on hand when you	u file your petition Cash:	
17.	,	•	certificates of deposit; shares in credit unts with the same institution, list each		
	✓ Yes		Institution name:		
		17.1. Checking account:	Guaranty Bank Checking Account		\$2.72
		17.2. Checking account:	PrePaid debit card		\$10.00
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks evestment accounts with brokerage	firms, money market accounts		
	✓ No ☐ Yes	Institution or issuer name:			
19.	Non-publicly traded stan LLC, partnership, a		ed and unincorporated businesse	s, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	

Christo 6 ase 16-16590 MDoc 1 Filed 05/12/3/16 Entered 05/11/7/11/6 (123:43:38 Desc Main Document Page 15 of 75 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Type of account: Institution name: Yes. List each \$1000.00 401K account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debt	or 1	Christopbe First Name	ase 1	6-16590	MDoc 1 Middle Name		05/12/7/016 cumethtme			6/143443: <u>38</u>	Desc	<u>Main</u>
24.				ation IRA, in a), 529A(b), and		a qualifie	d ABLE progra	m, or unde	r a qualified sta	te tuition program.		
		No Yes	Instituti	ion name and o	description. Sep	arately file	the records of a	ny interests.	11 U.S.C. § 521(c):	_	
25.					ets in property	(other th	an anything lis	ted in line 1), and rights or	powers		
		rcisable fo No	·	benefit								
	Ц	Yes. Desc	ribe									
26.	Еха		rnet dor				intellectual pro yalties and licens		ents			
27.					eneral intangil e licenses, coo		ssociation holdin	gs, liquor lic	enses, professio	nal licenses		
	✓	No										
	Ц	Yes. Desc	ribe									
Mor	iey (or prope	erty ov	wed to you	?						porti Do no	ent value of the on you own? deduct secured or exemptions.
28.	Tax	refunds ov	ved to	you								
			necific i	information						Federal:		
		about	them, i	ncluding wheth iled the returns						State:		
		-	-	ears						Local:		
29.	Exan			lump sum alimo	ony, spousal sup	oport, child	support, mainte	nance, divor	ce settlement, pro	operty settlement		
		No Van Oirran	:c:-:	:f						Alimony:		
		yes. Give s	pecific i	information						Maintenance:		
										Support:		
										Divorce settlement	: <u> </u>	_
										Property settlemen	t:	
		<i>nples:</i> Unpa	aid wag	-			-	pay, vacatio	n pay, workers' co	mpensation,		
	✓ 1	No Goo.		,	,, , , , , , , , , , , , , , , , ,							
		Yes. Descr	ibe								—	

Debt	or 1	Christo base 16	6-16590	MDOC 1 Middle Name		<u>05/127√16</u> um ^{ae} rnt [™]	Entered Page 17 (L6 (L3 ;43: <u>38</u>	Des	<u>c Main</u>
31.		rests in insurance mples: Health, disabi		rance; health			· ·		r's insurance		
		No Yes. Name the insur of each policy and lis		,	Company na	me:			Beneficiary:	<u> </u>	Surrender or refund value:
32.	If you	interest in propert u are the beneficiary erty because someo No Yes. Describe	of a living trus				policy, or are curr	rently entitle	d to receive		
33.	Exar ✓	ms against third pa mples: Accidents, em					ade a demand	for paymer	nt		
34.	_	Yes. Describe er contingent and	unliquidated	claims of ev	very nature	including co	unterclaims of	the debtor	and rights		
	to s	et off claims No Yes. Describe									
35.	✓	financial assets you No Yes. Describe	u did not alre	ady list							
36.		the dollar value of Part 4. Write that nu	-								\$1012.72
Part	5:	Describe Any E	susiness-R	elated Pro	perty You	ı Own or H	ave an Intere	est In. Lis	st any real estate	e in P	art 1.
37.	Do y	ou own or have ar	y legal or equ	uitable inter	est in any b	usiness-relate	d property?				
		No. Go to Part 6. Yes. Go to line 38.								po i Do	rrent value of the rtion you own? not deduct secured claims exemptions
38.	✓	ounts receivable or No Yes. Describe	commission	s you alread	ly earned					_	
39.	Exar	ce equipment, furn mples: Business-rela No Yes. Describe			nodems, prin	ters, copiers, fa	x machines, rug	s, telephone	es, desks, chairs, elect	ronic de	evices

		First Name		Middle Name	Filed 05/127/16 Document	Page 18 of 75	16 (143:43: <u>38 </u>	esc Main	
40.	Mac	hinery, fixtures, eq	uipment, su _l	oplies you us	se in business, and tools	of your trade			
	✓	No							
		Yes. Describe							
41.	Inve	entory							
	✓	No							
		Yes. Describe							
42.	Inte	rests in partnershi	ps or joint v	entures				J	
	✓								
					Name of entity:		% of ownership:		
		Yes. Give specific information about							
		them							
								<u> </u>	
43. C	Custo	omer lists, mailing	lists, or othe	r compilatio	ns				
	✓	No							
		Yes. Do your lists inc	clude persona	ılly identifiable	information (as defined in	11 U.S.C. § 101(41A))?			
	-	□ Na							
		∐ No							
		Yes. Descri	ibe						
44.	Any	business-related p	roperty you	did not alrea	dy list				
	~	No							
	=	Yes. Give specific							
	_	information							
15. A	dd th	e dollar value of al	l of your ent	ries from Par	rt 5, including any entries	s for pages you have attacl	hed		
or Pa	art 5.	Write that number	here				>		
Part	6:	Describe Any F If you own or have an	arm- and interest in far	Commerci mland, list it in	al Fishing-Related F	Property You Own or I	Have an Interest In		
46.	Do	you own or have a	ny legal or e	quitable inter	rest in any farm- or comm	nercial fishing-related prop	erty?		
	 ✓	No. Go to Part 7.						Current va	
	Ħ	Yes. Go to line 47.						portion you	
	Ш	100. 00 10 1110 17.						Do not dedu claims	ict secured
								or exemption	ns
47.		m animals							
	Exa	mples: Livestock, pou	ultry, farm-rais	ed fish					
	✓	No							
		Yes. Describe						1	

Deb	tor 1	Christo@ase 16-16590 First Name	MDoc 1 Middle Name		Entered 05/e Page 19 of 7!	1n7h16 (1k3;43: <u>38</u> 5	Desc	<u>Main</u>
48.	Cro	ps-either growing or harvested	d	Bocament	rage 15 or 7.	,		
	✓	No						
		Yes. Describe					_	
49.	Fari	m and fishing equipment, impl	ements, machi	nery, fixtures, and tools	of trade			
	✓	No						
		Yes. Describe					_	
50.	Farr	m and fishing supplies, chemic	als, and feed					
	✓	No						
		Yes. Describe					_	
51.	Any	farm- and commercial fishing-	related proper	ty you did not already lis	st			
	✓	No						
		Yes. Describe					_	
		e dollar value of all of your ent Write that number here						
Part		Describe All Property You have other property of any			at You Did Not L	list Above		
00.	Exar	mples: Season tickets, country club		or an oddy nor .				
	✓	No						
		Yes. Give specific information						
54. A	dd th	e dollar value of all of your ent	ries from Part	7. Write that number her	e		>	
							_	
Dort	0.	l ist the Totals of Each B	ort of this E	0.rm				
Part	ο.	List the Totals of Each Pa	art or this Fe	Orm				
55. F	Part 1	: Total real estate, line 2				▶		
56. p	oart 2	total vehicles, line 5		\$6425.00				
57. P	art 3:	: Total personal and household	d items, line 15	\$1300.00				
58. P	art 4:	: Total financial assets, line 36		\$1012.72				
59. F	Part 5	: Total business-related prope	rty, line 45					
60. F	Part 6	: Total farm- and fishing-relate	ed property, line	e 52				
61. F	Part 7	: Total other property not liste	d, line 54					
62. 1	Γotal	personal property. Add lines 56	through 61	\$8737.72				+ \$8737.72
						Copy personal property to	tal ►	· · · · · · · · · · · · · · · · · · ·
62 T	otal -	of all proporty on Schodulo A/R) Add line EE : !	ina 62				\$8737.72

Fill	in this inform	Case 16-16590 ation to identify your case:	Doc 1 Filed 05/	17/16 Entered 05/1	7/16 13:43:38	Desc Main
	otor 1	Christopher	M	Jackson		
	otor 2 ouse, if filing)	First Name	Middle Name Middle Name	Last Name Last Name		
				istrict of Illinois		
	se number nown)			(State)		
Of	ficial F	orm 106C			I	Check if this is a amended filing
			erty You Claim	as Exempt		12/1
the For is to exe rece exe pro	each iten o state a s mpted up eive certa mption of perty is d t1: Ident Which set	additional pages, write of property you claim pecific dollar amount to the amount of any in benefits, and taxed 100% of fair market wetermined to exceed the fifty the Property You Confexemptions are you claim and to exceed the fair market wetermined to exceed the fifty the Property You Confexemptions are you claim and the fair market wetermined to exceed the fair fair fair fair fair fair fair fair	m as exempt, you must as exempt. Alternative applicable statutory exempt retirement fundational and that amount, your exempt retirement fundational and that amount, your exempt retirement fundational and the finding? Check one only, even on bankruptcy exemptions. 11	umber (if known). It specify the amount of ely, you may claim the full limit. Some exemptionseds—may be unlimited in limits the exemption to mption would be limited in the full limited in the exemption would be limited in the exemption which would be limited in the exemption with your spouse is filing with you.	the exemption you all fair market value —such as those fo dollar amount. Ho a particular dollar	r health aids, rights to wever, if you claim an amount and the value of the
2.	For any pr	operty you list on Schedule	e A/B that you claim as exe	mpt, fill in the information belo	ow.	
		ription of the property and lle A/B that lists this prope		Amount of the exemption yo Check only one box for each ex		cific laws that allow exemption
	Brief description	Used Furniture	\$350.00	7		735 ILCS 5/12-1001(b)
	Line from Schedule A			\$350.00 100% of fair market value, u applicable statutory limit	up to any	
	Brief description	Used Clothes	\$450.00	7		735 ILCS 5/12-1001(a)
	Line from Schedule A	/B: <u>11</u>		\$450.00 100% of fair market value, u applicable statutory limit		
3.	(Subject to	adjustment on 4/01/19 and e		? s filed on or after the date of adjus 1.215 days before you filed this c	,	

 $\begin{array}{c} \text{Debtor 1} \\ \text{Erist Name} \end{array} \begin{array}{c} \underline{\text{Christo}} \\ \hline \text{First Name} \end{array} \begin{array}{c} \underline{\text{MDoc 1}} \\ \hline \text{Middle Name} \end{array}$ Filed 05/127/126 Entered 05/127/126/123:43:38 Desc Main Document Page 21 of 75

Additional Page

Addition	iai i age			
-	ion of the property and line A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Line from Schedule A/B:	Guaranty Bank Checking Account	\$2.72	\$2.72 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	PrePaid debit card	\$10.00	\$10.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	(1)Laptop (1)Desktop (1) Cell phone	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Current Vehicle	\$6,425.00	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Brief description: Line from Schedule A/B:	401K	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006

		Case 16-16590	Doc 1 Filed	05/17/16 Entered	05/17/16 12·/2·2	8 Desc Main	
Fill	in this informa	ation to identify your case:	TAN. I III-III		0.07.1710 13.43.3	o Desciviani	
Del	otor 1	Christopher First Name	M Middle Name	Jackson Last Name	_		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	_		
Uni	ited States Ba	nkruptcy Court for the: <u>N</u>	Northern	District of Illinois (State)	_		
	se number nown)				-		
Of	ficial F	orm 106D					heck if this is an mended filing
Sc	chedul	le D: Credito	rs Who Hav	ve Claims Sec	ured by Pro _l	perty	12/1
cor	n. On the Do any cre No. Ch Yes. Fi	mation. If more space top of any additional ditors have claims secured teck this box and submit this Il in all of the information belo	e is needed, copy to pages, write your d by your property? form to the court with you	rried people are filing to the Additional Page, fill name and case numbe or other schedules. You have not	it out, number the e r (if known).	ntries, and attach it	
	•	All Secured Claims					
2.	claim. If mor		articular claim, list the oth	claim, list the creditor separately er creditors in Part 2. As much a ditor's name.		that supports this	Column C Unsecured portion If any
2.1	CNAC/MI10 Creditor's Na 3718 STAD	ime	Describe the propert	y that secures the claim:	\$12,499.00	\$6,425.00	\$6,074.00
	Number	Street	O45 Automobile As of the date you file	e, the claim is: Check all that a	pply.		
	KALAMAZO City	DOMichigan 49008 State ZIP Code	Contingent Unliquidated				
	Who owes ✓ Debtor	the debt? Check one. 1 only	Disputed Nature of lien. Check	call that apply			
	Debtor 2	2 only 1 and Debtor 2 only		ப made (such as mortgage or se	cured		
	At least another	one of the debtors and		ch as tax lien, mechanic's lien)			
	Check commu	if this claim relates to a ınity debt	Judgment lien from Other (including a				
	Date debt w	vas incurred <u>4/1/2016</u>	Last 4 digits of acco	unt number 2465			
			Last 4 digits of acco	unit number			

		Case 16-16500	Doc 1 File	d 05/17/16	Entered ()	<u>5/1</u> 7/16 13:43:38	R Desc	Main	
Fill in	this informa	ation to identify your case:				7710 10.40.00	<i>D</i> C3C	IVICIII	
Debt	or 1	Christopher First Name	M Middle Name	Jacksor Last Na		_			
Debt (Spo		First Name	Middle Name	Last Na	me	_			
Unite	ed States Ba	nkruptcy Court for the:	Northern	District of Illir	nois ate)	_			
Case (If kno	e number own)			(0.		-			
Offi	icial Fo	orm 106E/F					Chec	ck if this is ar	n amended filing
Sc	hedu	le E/F: Cred	ditors Who	Have Ur	nsecure	ed Claims			12/15
Part 1.	Do any cre No. Go Yes. List all of yidentify what	e left. Attach the Continu All of Your PRIORITY ditors have priority unser to to Part 2.	uation Page to this paragrams ' Unsecured Claim cured claims against claims. If a creditor has m has both priority and	ge. On the top of and ms you? more than one priorinonpriority amounts,	ny additional particles of the state of the	ded, copy the Part you n ages, write your name ar aim, list the creditor separat re and show both priority an an two priority unsecured cl	nd case num ely for each cl	ber (if know	ch claim listed, much as
	Part 1. If me	ore than one creditor holds lanation of each type of cla	s a particular claim, list	the other creditors in	Part 3.	, ,	airris, iiii out ti	ie Continuat	ion rage of
							Total claim	Priority amount	Nonpriority amount
	PO Box 734 Number Philadelphia City Who incur Debtor Debtor Debtor At least Check	Pennsylvania State red the debt? Check one 1 only	19101 Zip Code 	Contingent Unliquidated Disputed Type of PRIORITY Domestic supp Taxes and certa	ot incurred? file, the claim i unsecured clai ort obligations in other debts you	n/a s: Check all that apply.	\$1.00	\$1.00	\$0.00
	Yes								

Christo@ase 16-16590 MDoc 1 Filed 05/1274/16 Entered 05/147/146/143:43:38 Desc Main Debtor 1 Document Page 24 of 75 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 City of Chicago Parking \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60602 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify parking tickets Is the claim subject to offset? **✓** No Yes 4.2 ComEd \$800.00 Last 4 digits of account number Nonpriority Creditor's Name 3 Lincoln Center When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60181 Oakbrook Terrace Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify Light Bill **✓** No Yes 4.3 CONVERGENT OUTSOURCING \$349.00 Last 4 digits of account number 0614 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? 10/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent Renton Washington 98057 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

Other. Specify

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

001 Collection; Collecting for ORIGINAL

CREDITOR: COMCAST

you did not report as priority claims

Debtor 1 Christo Coase 16-16590 MDoc 1 Filed 05/16/76/16 Entered 05/16/76/16 (16-3):43:38 Desc Main First Name Document Page

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim				
4.4	DEPT OF ED/NAVIENT	— Lost 4 digits of account number 0224	\$308.00		
	Nonpriority Creditor's Name PO Box 9635	Last 4 digits of account number 0324	<u> </u>		
	Number Street	When was the debt incurred? 3/1/2015			
		As of the date you file, the claim is: Check all that apply.			
	Wilkes Barre Pennsylvania 18773	Contingent			
	City State Zip Code	Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	Disputed			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	✓ Student loans			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that			
	불	you did not report as priority claims			
	Check if this claim relates to a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
	No	Other. Specify			
	Yes				
4.5	Devon Financial Services		\$500.00		
4.5	Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00		
	6414 N. Western Ave Number Street	When was the debt incurred?n/a			
	Trained Strock	As of the date you file, the claim is: Check all that apply.			
	Chicago Illinois 60645	Contingent			
	ChicagoIllinois60645CityStateZip Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that			
	At least one of the debtors and another	you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	Other. Specify payday loan			
	✓ No				
T 1	Yes				
4.6	ERC Nonpriority Creditor's Name	Last 4 digits of account number1568	\$342.00		
	8014 Bayberry Road	When was the debt incurred? 5/1/2013			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	Jacksonville Florida 32256 City State Zip Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	Collection; Collecting for ORIGINAL			
	✓ No	Other. Specify <u>CREDITOR: 11 USCELLULAR</u>			
	☐ Yes				

Debtor 1 Christo Case 16-16590 MDoc 1 Filed 05/167646 Entered 05/1676463:43:38 Desc Main
First Name Document Page 26 of 75

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth.	Total claim		
4.7	FAIR COLLECTIONS & OUT		\$7,123.00		
	Nonpriority Creditor's Name	Last 4 digits of account number 8722	Ψ1,120.00		
	12304 BALTIMORE AVE STE	When was the debt incurred? 11/1/2010			
	Number Street	As of the date you file the claim is: Check all that apply			
		As of the date you file, the claim is: Check all that apply.			
	BELTSVILLE Maryland 20705	Contingent			
	City State Zip Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	- ·			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
		Student loans			
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that			
	At least one of the debtors and another	you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	Central Park Town vs Christopher Jackson			
	✓ No	Other. Specify <u>case number: 2010-M1-715319</u>			
	片				
	Yes				
4.8	HBLC	Last 4 digits of account number	\$1,342.28		
	Nonpriority Creditor's Name 2615 3 Oaks Rd	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	Cary Illinois 60013	Unliquidated			
	City State Zip Code				
	Who incurred the debt? Check one. Debtor 1 only	Disputed			
		Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
		HBLC INC vs Christopher Jackson Case			
	Is the claim subject to offset?	Other. Specify Number: 2014-M1-115742			
	<u>✓</u> No				
	Yes				
4.9	HWARFIELD	Last 4 digita of account yourshap 5775	\$161.00		
	Nonpriority Creditor's Name	Last 4 digits of account number5775			
	4620 WOODLAND CORP	When was the debt incurred? 10/1/2013			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	TAMPA Florida 33614				
	City State Zip Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	불	<u> </u>			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	001 Collection; Collecting for ORIGINAL CREDITOR: 09 BENCHMARK			
	✓ No	Other. Specify MANAGEMENT			
	Voc	. ,			

Debtor 1 Christo Chase 16-16590 MDoc 1 Filed 05/16/76/16 Entered 05/16/76/16 Mai:43:38 Desc Main

instrume Middle Name Documentum Page 27 of 75

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.10 Illinois Lending Corporation \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 2109 S. Wabash When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Illinois 60616 Chicago Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify payday loan **✓** No Yes 4.11 Illinois Tollway \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **Downers Grove** 60515 Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? \square Other, Specify Tolls **✓** No Yes 4.12 MCSI INC \$250.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 327 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent PALOS HEIGHTS Illinois 60463 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts

✓ No

Yes

Is the claim subject to offset?

V

Other. Specify

Collection; Collecting for ORIGINAL CREDITOR: 01 VILLAGE OF UNIVERSITY PARK Debtor 1 Christo Chase 16-16590 MDoc 1 Filed 05/16/76/16 Entered 05/16/76/16 (163:43:38 Desc Main First Name Docume 11th Page 28 of 75

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Last 4 digits of account number	After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.				
As of the date you flie, the claim is: Check all that apply. PALLOS HEIGHTS Illinois 60463 City State Zip Code Unliquidated Unliquidated	Nonpriority PO BOX 32	7		\$200.00	
Nonpriority Creditor's Name 1460 RENAISSANCE D SUITE 400 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? When was the debt incurred? Collection; Collecting for ORIGINAL CREDITOR: MEDICAL As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated Who incurred the debt? Check one. Disputed Type of NONPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: MEDICAL CREDITOR: MEDICAL As of the date you file, the claim is: Check all that apply. CHICAGO Illinois 60604 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Summer of the debtors and another Check if this claim relates to a community debt Student loans Last 4 digits of account number Check all that apply. Contingent Contingent Unliquidated	PALOS HE City Who incur Debtor Debtor At least Check Is the clair	IGHTS Illinois 60463 State Zip Code rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates to a community debt	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: 01 CITY OF COUNTRY		
At least one of the debtors and another Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: MEDICAL	Nonpriority 1460 RENA Number PARK RIDO City Who incut Debtor	Creditor's Name AISSANCE D SUITE 400 Street GE Illinois 60068 State Zip Code rred the debt? Check one. 1 only 2 only	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	\$2,295.00	
Nonpriority Creditor's Name 111 WEST JACKSON Number Street As of the date you file, the claim is: Check all that apply. CHICAGO Illinois 60604 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Disputed Obligations arising out of a separation agreement or divorce that you did not report as priority claims	At least Check Is the clair No Yes	t one of the debtors and another if this claim relates to a community debt n subject to offset?	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL		
CHICAGO Illinois 60604 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Nonpriority 111 WEST	Creditor's Name JACKSON	When was the debt incurred? 12/1/2010 As of the date you file, the claim is: Check all that apply.	\$150.00	
Is the claim subject to offset? No Collection; Collecting for ORIGINAL Other. Specify CREDITOR: MEDICAL	City Who incur Debtor Debtor Debtor At least Check Is the clair	State Zip Code rred the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates to a community debt	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL		

Christo foase 16-16590 MDoc 1 Filed 05/12/616 Entered 05/12/116 1183:43:38 Desc Main
First Name Docume Page 29 of 75

Your NONPRIORITY Unsecured Claims - Continuation Page Debtor 1 Christo Case 16-16590 MDoc 1 First Name Middle Name

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.16	National Credit Lenders Nonpriority Creditor's Name	- Last 4 digits of account number	\$700.00
	157 W 159th St	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Harvey Illinois 60426 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 and Debtor 3 anh	Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Payday loan	
	✓ No	_	
	Yes		
4.17	Nicor Gas Nonpriority Creditor's Name	— Last 4 digits of account number	\$1,000.00
	90 N. Finley Road	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Glen Ellyn Illinois 60137 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 and Debtor 2 and	Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Gas Bill	
	✓ No		
4.18	Yes STELLAR RECOVERY INC		\$818.00
	Nonpriority Creditor's Name 4500 Salisbury Rd Ste 10	— Last 4 digits of account number 3975	φο το.σο
	Number Street	When was the debt incurred? 4/1/2011	
		As of the date you file, the claim is: Check all that apply.	
	Jacksonville Florida 32216	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CREDITOR: COMCAST	
	Yes		

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First Name Document Page 30 of 75

Your NONPRIORITY Unsecured Claims - Continuation Page Debtor 1 Christo Case 16-16590 MDoc 1 First Name Middle Name

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.19	UNITED TRANZACTIONS Nonpriority Creditor's Name	— Last 4 digits of account number2200	\$67.00
	2811 CORPORATE WAY Number Street	When was the debt incurred?11/1/2014 As of the date you file, the claim is: Check all that apply.	
	MIRAMAR Florida 33025 City State Zip Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: VILLAGE OF RICHTON Other. Specify PARK FRONT	
4.20	US Bank Nonpriority Creditor's Name	— Last 4 digits of account number	\$200.00
	425 Walnut Street Number Street	When was the debt incurred?n/a	
	Cincinnati Ohio 45202	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
	City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify NSF	
4.21	WORLD FINANCE CORPORAT Nonpriority Creditor's Name	— Last 4 digits of account number	\$679.00
	W., 4318 211th St Number Street	When was the debt incurred?11/1/2015 As of the date you file, the claim is: Check all that apply.	
	Matteson Illinois 60443 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another Check if this claim relates to a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	☐ Debts to pension or profit-snaring plans, and other similar debts ✓ Other. Specify	

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After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
Zingo Cash Nonpriority Creditor's Name 200 Fairway Drive Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply.	\$700.00
Vernon Hills Illinois 60061 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Payday loan	

Debtor 1

Part 3:

Christo@ase 16-16590 MDoc 1

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List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. KAHN SANFORD LTD On which entry in Part 1 or Part 2 did you list the original creditor? of (Check one): Part 1: Creditors with Priority Unsecured Claims 180 N LASALLE Number Street ✓ Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60601 Last 4 digits of account number 8722 City State Zip Code Comcast On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims 11621 E. Marginal Way # 5 Number Street ✓ Part 2: Creditors with Nonpriority Unsecured Claims Seattle Washington 98168 Last 4 digits of account number City State Zip Code Comcast Corporation On which entry in Part 1 or Part 2 did you list the original creditor? of (Check one): Part 1: Creditors with Priority Unsecured Claims Line 4.18 880 Donata Court Number ✓ Part 2: Creditors with Nonpriority Unsecured Claims Lake Zurich Illinois 60047 Last 4 digits of account number City State Zip Code **US Cellular** On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims Dept 0205 Number Street Part 2: Creditors with Nonpriority Unsecured Palatine Illinois 60055 Last 4 digits of account number 1568 City State Zip Code Village of University Park On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims 698 Burnham Drive Number Part 2: Creditors with Nonpriority Unsecured Claims University Park Illinois 60484 Last 4 digits of account number 9079 City Zip Code City of Country Club Hills On which entry in Part 1 or Part 2 did you list the original creditor? Name PO Box 7690 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street ✓ Part 2: Creditors with Nonpriority Unsecured Claims Carol Stream Illinois 60197 Last 4 digits of account number City State Zip Code Fink, Steven J. On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims Line 4.8 25 E Washington St Ste 1233 Number ✓ Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60602 Last 4 digits of account number City State Zip Code

Christo 66ase 16-16590 MDoc 1

Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Page 33 of 75

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$1.00 amount here. 6e. Total. Add lines 6a through 6d. \$1.00 **Total claims** \$308.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. amount here. \$19,484.28 6j. Total. Add lines 6f through 6i. 6j.

Part 4:

	Case 16-16590	Doc 1 Filed 0	5/17/16 Entered	05/17/16 13:43:38	Desc Main
Fill in this inform	mation to identify your case:		Ų.	, = 0 = 00.00	2 000
Debtor 1	Christopher First Name	M Middle Name	Jackson Last Name		
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(State)		
Official	Form 106G			<u></u>	Check if this is an amended filing
Schedu	le G: Executo	ry Contracts	and Unexpired	l Leases	12/1:
	ed, copy the additional pag				ing correct information. If more onal pages, write your name and
1. Do you h	nave any executory co	ntracts or unexpired	l leases?		
No. Ch	eck this box and file this form	with the court with your other	er schedules. You have nothing	g else to report on this form.	
✓ Yes. Fil	II in all of the information below	v even if the contracts or le	ases are listed on <i>Schedule A</i>	/B: Property (Official Form 106A	/B).
				state what each contract or le amples of executory contracts an	
Perso	n or company with whom y	ou have the contract or le	ease	State what the contrac	t or lease is for
2.1 Lioncres	t Homeowners Association			Other,	
Name				Other, Landlord	

5000 Euclid Ln Number

Richton Park City Street

Illinois State 60471 Zip Code

		Case 16-1659	n Doc 1 Filad C	E/17/16 Entoro	1.05/1.7/16 13:43:38	Doce Main
Fill in	this inform	ation to identify your cas			103/1/10 13.43.30	Desc Main
Debte	or 1	Christopher	M	Jackson		
D.1.	0	First Name	Middle Name	Last Name		
Debte (Spot		First Name	Middle Name	Last Name		
Unite	d States Ba	ankruptcy Court for the:	Northern	District of Illinois		
		, ,		(State)		
(If kno	number own)					
					<u>.</u>	Check if this is a amended filing
∩ff	icial F	Form 106H				amended illing
			- d - l-			
		e H: Your Co			plete and accurate as possible.	12/1
1. [✓ No Yes	, ,,	ou are filing a joint case, do not	·	·	rica ingluda Arizana California Idaha
L	ouisiana, N		erto Rico, Texas, Washington,	•	munity property states and termor	ies include Arizona, California, Idaho,
			pouse, or legal equivalent live v	with you at the time?		
Ī	_ <u>~</u> v	lo				
	□ Y	es. In which community s	state or territory did you live?	Fill in th	ne name and current address of th	nat person.
		Name of your spouse, f	former spouse, or legal equivale	ent	<u> </u>	
		Ni walan Charat			<u>—</u>	
		Number Street				
		City	State	Zip Code		
а	s a codeb	tor only if that person	is a guarantor or cosigner. I	Make sure you have listed		t the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> plumn 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Fill in tl	his information to identify	your case:			7/16 13	:43:38	Desc M	1ain	
	0.1	Docui		ige oo o i	73				
Debtor 1	Christopher First Name	M Middle Name	Jackson Leat Name		-				
D - l- 1 0		Middle Name	Last Name	;		Check if this	is:		
Debtor 2 (Spouse,	if filing) First Name	Middle Name	Last Name	7	-	An amer	nded filing		
(-1,	3/ Tilat Name	Wilddic Name	Lastivanie	•			ment showi	na noet	-petition chapter 13
United St	ates Bankruptcy Court for the:	Northern	District of Illinois (State		-		s as of the fo		
Case nur (If known)						MM / DD / YYYY			
Offici	al Form 106l								
Sche	dule I: Your Inc	ome							12/15
ages, v		e. If more space is neede se number (if known). A nt			neet to this i	orm. On ti	ie top of	any a	
1	Fill in your employment		Debtor 1			Debtor 2			
	information.	Employment status	CI Canalana d			- Employed			
	If you have more than one job, attach a separate page with information about additional	Employment status	✓ Employed			Employed			
			Not Employed			☐ Not Em	ployed		
		Occupation	Collections De	partment					
	employers.	Employer's name	Enova			-			
	Include part time, seasonal, or self-employed work.	Employer's address		W Jackson Blvd., Ste1000					
			Number Street			Number Street			
	Occupation may include		Casheuronetuk	(
	student or homemaker, if it applies.								
	or nomemaker, in applies.		Chicago	Illinois	60604	City		State	Zip Code
			City	State	Zip Code	City	`	State	Zip Code
		How long employed there?	1 year 5 months	<u>s</u>					
Estimate are separate of the s	arated.	Monthly Income date you file this form. If you have than one employer, combine the		all employers		the lines belo	ow. If you ne		-
2. Lis	st monthly gross wages, salar	2.	\$3,107.09	non-filing	spouse				
de	ductions.) If not paid monthly, cal					_			
3. Estimate and list monthly overtime pay. 3.					+ \$0.00			_	

4. Calculate gross income. Add line 2 + line 3.

\$3,107.09

Debtor 1 Christopi Gase 16-16590 M Doc 1 Filed 05/41/46/16 Entered @5/17/11/6 13:43:38 Desc Main Documentame Page 37 of 75 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$3,107.09 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$436.39 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$93.21 5e. Insurance 5e. \$184.02 5f. Domestic support obligations 5f. \$0.00 5q. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$713.61 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,393.47 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 \$2,393.47 10. Calculate monthly income. Add line 7 + line 9. 10. \$2,393.47 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$2,393,47 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

	Case 16-1659	O Doc 1 Filed 0	5/17/16 Entered 0	<u>15/1</u> 7/16 13:43:38	Desc Main
Fill in this inform	ation to identify your ca	se:	J		
Debtor 1	Christopher First Name	M Middle Name	Jackson Last Name	_	
Debtor 2) -			Check if this is:	
(Spouse, if filing	First Name	Middle Name	Last Name	An amended filing	ng
	ankruptcy Court for the:	Northern	District of Illinois (State)		nowing post-petition chapter 13 the following date:
Case number (If known)					<u></u>
Official F	Form 106J			WIIWI / DD / Y Y Y	Ť
	e J: Your Ex	kpenses			12/1
Be as complete nformation. If n (if known). Ansv	and accurate as poss nore space is needed, wer every question.	ible. If two married people are attach another sheet to this for			
	ribe Your Househ	old			
1. Is this a join	t case?				
✓ No. Go	to line 2				
Yes. Do	es Debtor 2 live in a s	eparate household?			
	No				
	Yes. Debtor 2 must fil	e Official Forms 106J-2, Expens	es for Separate Household of L	Debtor 2.	
2. Do you have	dependents?	No			
Do not list De Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship Debtor 1 or Debtor 2 Child	p to Dependent's age	Does dependent live with you?
			Q		✓ Yes.
			Child		No. ✓ Yes.
			Child		No.
			-		✓ Yes.
			Child		No.
					✓ Yes.
3. Do your expenses of		No			
than		Yes			
yourself and dependents	your —	100			
Part 2: Estim	nate Your Ongoing	Monthly Expenses			
	f a date after the bank	ankruptcy filing date unless y ruptcy is filed. If this is a supp			
		cash government assistance i it on <i>Schedule I: Your Incom</i> e			Your expenses
	or home ownership ex the ground or lot. 4.	penses for your residence. Inc	lude first mortgage payments a	and	\$700.00
If not inclu	ided in line 4:				
4a. Real est	tate taxes				4a \$0.00
4b. Property	y, homeowner's, or rente	er's insurance			4b. \$0.00
4c. Home m	naintenance, repair, and	upkeep expenses			4c. \$0.00
4d. Homeo	wner's association or co	ndominium dues			4d. \$0.00

Christo@ase 16-16590 MDoc 1

Document Page 39 of 75 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$140.00 6a. 6b. Water, sewer, garbage collection \$100.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$140.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies 7. \$375.00 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$120.00 9. 10. Personal care products and services \$40.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$125.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$200.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$80.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$362.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues

\$0.00

20e

	Christo Gase 16-16590 MDoc 1 Filed 05/12/166 Entered 05/12/166/12643:38 First Name Document Page 40 of 75	Desc Main	
21. Other.		21	\$0.00
	· · · · · · · · · · · · · · · · · · ·	2.	
22. Calcul	ate your monthly expenses.		\$2,382.00
22a. Ad	d lines 4 through 21.	_	\$0.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	_	\$2,382.00
22c. Ac	d line 22a and 22b. The result is your monthly expenses.	22.	<u> </u>
23.Calcula	te your monthly net income.		
	py line 12 (your combined monthly income) from Schedule I.	23a	\$2,393.47
23b. Co	py your monthly expenses from line 22 above.	23b	\$2,382.00
	otract your monthly expenses from your monthly income. ne result is your monthly net income.	23c	\$11.47
24. Do yo i	expect an increase or decrease in your expenses within the year after you file this form?	200	
	ample, do you expect to finish paying for your car loan within the year or do you expect your ge payment to increase or decrease because of a modification to the terms of your mortgage?		
✓ N			
Ye	S		
_	Explain here:		

page 3

	Case 16-16590) Doc 1 Filed 0	5/17/16 Enter	<u>red 05/1</u> 7/16 13:43:38	Desc Main
Fill in this info	rmation to identify your case		Ü	1710 10:40:00	Description 1
Debtor 1	Christopher First Name	M Middle Name	Jackson Last Name		
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name		
United States Case number	Bankruptcy Court for the:	Northern	District of Illinois (State)		
(If known)					_
Official	Form 106De	<u> </u>			Check if this is a amended filing
Declara	ition About ar	n Individual De	btor's Sche	dules	12/1
Part 1: Sig	n Below	one who is NOT an attorney	to help you fill out bar	nkruptcy forms?	
✓ No Yes.	Name of person		Attach Bankrupt Signature (Offici	tcy Petition Preparer's Notice, Decla ial Form 119).	eration, and
that they	enalty of perjury, I declare vare true and correct. stopher Jackson e of Debtor 1	that I have read the summa	×	I with this declaration and ature of Debtor 2	
Date 5/1	7/2016		Date		

MM/DD/YYYY

MM/DD/YYYY

		Case 16-16590	Doc 1	Filed 05/17/16	Entered 05/	<u>1</u> 7/16 13:43:38	Desc Main
Fill ir	n this inform	nation to identify your case:			<u> </u>		
Deb	tor 1	Christopher	М	Jackso	on		
		First Name	Middle I	Name Last N	ame		
	tor 2 use, if filing	First Name	Middle I	Name Last N	ame		
Unite	ed States B	ankruptcy Court for the:	Northern	District of Illi	inois State)		
	e number			(-			
(II KII	own)						Check if this is a
Off	ficial F	Form 107					amended filing
		nt of Financia	al Affaire	for Individu	ale Filing	for Bankrunt	CV 12/
						•	ring correct information. If more
space	e is needed	d, attach a separate sheet	to this form. Or	the top of any addition	al pages, write you	r name and case numbe	er (if known). Answer every question
D	O ive	Detaile About Yours	Annital Ctatus	and Whan Varili	und Dafass		
Part	1 Give	Details About Your	naritai Status	s and where you Liv	vea Before		
1.	What is	your current marital state	ıs?				
	Mar	rried					
	✓ Not	married					
2.	During t	he last 3 years, have you	ived anywhere	other than where you live	e now?		
۷.		ne last 5 years, have you	ived ally where t	ouler than where you have	e now:		
	✓ No	. List all of the places you live	ad in the leat 2 year	ara. Do not include where y	you live now		
	res.	. List all of the places you live	ed in the last 3 yea	ars. Do not include where	you live now.		
	Dak	44-		Datas Dahtan 4 lived	Dahtan O		Datas Dahtar Olived
	Deb	otor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					Same as D	Jebtor 1	Same as Debtor 1
	Ni	shan Otrock		- From	Ni walan Cina		From
	Num	nber Street		 _ To	Number Stree	Л	To
	City	State	Zip Code	_	City	State Zip C	ode
			p		Same as D	· · ·	Same as Debtor 1
	Num	nber Street		From	Number Stree	et	From
				_ To			To
	City	State	Zip Code	_	City	State Zip C	ode
_							
		l ast 8 years, did you ever nclude Arizona, California, k					(Community property states and
1	√ No						
		lake sure you fill out Schedu	lle H: Your Codeb	otors (Official Form 106H)			
		,		,			

 $\begin{array}{c} \text{Debtor 1} \\ \text{Erist Name} \end{array} \begin{array}{c} \underline{\text{Christo}} \\ \hline \text{First Name} \end{array} \begin{array}{c} \underline{\text{MDoc 1}} \\ \hline \text{Middle Name} \end{array}$ Filed 05/127/116 Entered 05/117/116/112:43:38 Desc Main Document Page 43 of 75

art	2: Explain the Sources of Your Inc	come	_					
	Fill in the total amount of income you received	or from operating a business during this year or the two previous calendar years? rom all jobs and all businesses, including part-time ve income that you receive together, list it only once under Debtor 1.						
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$12233.57	Wages, commissions, bonuses, tips Operating a business				
	For last calendar year: (January 1 to December 31,	✓ Wages, commissions, bonuses, tips Operating a business	\$38053.05	☐ Wages, commissions, bonuses, tips ☐ Operating a business				
	For the calendar year before that: (January 1 to December 31, 2014) YYYY	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$5000.00					
l k	Did you receive any other income during thin clude income regardless of whether that income penefit payments; pensions; rental income; interest and you have income that you received together, sist each source and the gross income from each No Yes. Fill in the details.	ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child so from lawsuits; royalties; and	gambling and lottery winnings.				
		Debtor 1		Debtor 2				
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)			
	From January 1 of current year until the date you filed for bankruptcy:							
	For last calendar year: (January 1 to December 31, 2015) YYYY							
	For the calendar year before that: (January 1 to December 31,	Unemployment	\$5,700.00					

Debtor 1 Christophase 16-16590 MDoc 1 Filed 05/12/75/16 Entered 05/11/7/116 (1/2):43:38 Desc Main

irist Name Middle Name Document Page 44 of 75

List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car Number Street Credit card

City

State

Zip Code

Loan repayment Suppliers or vendors

Other

Christo@ase 16-16590 MDoc 1 Debtor 1 Document Page 45 of 75 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

 $\begin{array}{c} \text{Debtor 1} \\ \text{Erist Name} \end{array} \begin{array}{c} \underline{\text{Christo}} \\ \hline \text{First Name} \end{array} \begin{array}{c} \underline{\text{MDoc 1}} \\ \hline \text{Middle Name} \end{array}$ Filed 05/12/75/16 Entered 05/14/76/16/12:43:38 Desc Main Documente Page 46 of 75

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

atus of the case
Pending
, i
On appeal
Concluded
_
Pending
On appeal
Concluded
Value of the property
_
Value of the property

Debt	tor 1		d 05/127/116 Entered 05/17/116 /123:43	: <u>38 Desc</u>	<u>Main</u>
11.		nin 90 days before you filed for bankruptcy, did any ounts or refuse to make a payment because you owe	creditor, including a bank or financial institution, set o	ff any amounts fr	om your
		No Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		IRS 1 Creditor's Name	IRS set off	2/29/2016	\$0.00
		PO Box 7346			
		Number Street	Last 4 digits of account number: XXXX-3463		
		Distribution Deposit agric 40404	Last 4 digits of account flumber. AAAA-3403		
		PhiladelphiaPennsylvania19101CityStateZip Code			
12.		nin 1 year before you filed for bankruptcy, was any o iver, a custodian, or another official?	f your property in the possession of an assignee for th	e benefit of credi	tors, a court-appointed
	_	No			
		Yes			
Part	5:	List Certain Gifts and Contributions			
13.	Wit	thin 2 years before you filed for bankruptcy, did you	give any gifts with a total value of more than \$600 per	person?	
		No			
	✓	Yes. Fill in the details for each gift.	D 11 16		
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		New Faith Missionary Baptist Church	\$100 per paycheck on Tithes	5/8/2016	\$900.00
		Person to Whom You Gave the Gift			
		8400 S Halsted St			
		Number Street			
		Chicago Illinois 60620 City State Zip Code			
		Person's relationship to you Tithes			
		Person to Whom You Gave the Gift			
		- Classific Whom fou dave the one			
		Number Street			
		City State Zip Code			
		Person's relationship to you			

		First Name Milddle Name Do	cument Page 48 of 75		
14.	With		give any gifts or contributions with a total value of more	e than \$600 to an	y charity?
		No Yes. Fill in the details for each gift or contribution.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name			
		Number Chrot			
		Number Street City State Zip Code			
Part	6: I	List Certain Losses			
15.		nin 1 year before you filed for bankruptcy or since yo bling?	u filed for bankruptcy, did you lose anything because o	of theft, fire, othe	r disaster, or
	_	No Yes. Fill in the details.			
	_	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
			insurance claims on line 33 of Schedule A/B: Property.		
Part	7:	List Certain Payments or Transfers			
16.	seek	ing bankruptcy or preparing a bankruptcy petition?	anyone else acting on your behalf pay or transfer any p		e you consulted about
	_	No	counseling agencies for services required in your bankrupto	у.	
	Ц	Yes. Fill in the details.	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Person Who Was Paid			
		Number Street			
		- Chiect			
		City State Zip Code			
		Email or website address			
		Person Who Made the Payment, if Not You			
		Person Who Was Paid			
		Number Street			
		City State Zip Code			
		Email or website address			
		Person Who Made the Payment, if Not You			

Debtor 1 Christo (Gase 16-16590 м Doc 1 Filed 05/1676/16 Entered 05/1676/16 (Ass: 43:38 Desc Main

Yes. Fill in the details.	Description and value of any prop	erty transferred	Date payment or transfer	Amount of pay	ymer
			was made		
Person Who Was Paid					
Number Street					
City State Zip Code					
ordinary course of your business or financial affairs include both outright transfers and transfers made as se ransfers that you have already listed on this statement. No Yes. Fill in the details.		erest or mortgage or	your property). Do	not include gifts	and
	Description and value of any		property or paym		
	property transferred	received or d	ebts paid in excha	ange was m	ade
Person Who Received Transfer					
Number Street					
City State Zip Code Person's relationship to you					
1 Craorra relationarip to you				-	
Person Who Received Transfer					
Person Who Received Transfer					
Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)	you transfer any property to a self-settle	d trust or similar d	evice of which yo	u are a benefici	ary?
Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)	you transfer any property to a self-settle Description and value of the prop		evice of which you	u are a beneficia	ransi

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 $\begin{array}{c} \text{Debtor 1} \\ \text{Erist Name} \end{array} \begin{array}{c} \underline{\text{Christo}} \\ \hline \text{First Name} \end{array} \begin{array}{c} \underline{\text{MDoc 1}} \\ \hline \text{Middle Name} \end{array}$ Filed 05/127/16 Entered 05/127/16/123:43:38 Desc Main Documenter Page 50 of 75

				_	
Part 8:	List Certair	n Financial Accounts	. Instruments.	Safe Deposit Boxes.	and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sor transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension cooperatives, associations, and other financial institutions. No							
		Yes. Fill in the details.				_	
			Last 4 digits of account number	Type of instrum	account or ent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	— XXXX-		ecking ings		
		Number Street			ney market kerage er		
		City State Zip Code					
		Person Who Was Paid	XXXX-		ecking ings		
		Number Street		Brol	ney market kerage		
			<u></u>	Oth	er		
		City State Zip Code					
21.	valu	ou now have, or did you have within 1 year befables? No Yes. Fill in the details.	ore you filed for bankruptcy, any	safe deposit	box or other depositor	ry for securities,	cash, or other
	_		Who else had access to it?		Describe the contents	3	Do you still have it?
		Name of Financial Institution	Name				No
		Number Street	Number Street				Yes
			City State Z	Zip Code			
		City State Zip Code					
22.	Have	e you stored property in a storage unit or place	other than your home within 1 years	ear before y	ou filed for bankruptcy	?	
		No Yes. Fill in the details.					
	Ц	res. I ili ili ule details.	Who else had access to it?		Describe the contents	3	Do you still have it?
		Name of Storage Facility	Name				☐ No
		Number Street	Number Street				Yes
			City State Z	Zip Code			
		City State Zip Code					

Deb	otor 1	Christo 648e 16-16590 MDoc 1 First Name Middle Name	Filed 05/1 Docume	tht ^{me} Paq	ntered 05/1 ge 51 of 75	ന് ⁄പ6 ⁄പ്.3:43: <u>38 Desc Mai</u> l	<u>n</u>
Pari	9:	Identify Property You Hold or Contro	I for Someo	ne Else			
23.	Do y	you hold or control any property that someone No Yes. Fill in the details.	e else owns? Ir	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	st for someone.
	ш	Too. I ill ill tile detaile.	Where is the	e property?		Describe the contents	Value
		Owner's Name	Number Stre	eet		-	
		Number Street				-	
			— City	Stata	Zin Codo	-	
		City State 7in Code	City —	State	Zip Code		
		City State Zip Code					
		Give Details About Environmental In	ntormation				
For	·	urpose of Part 10, the following definitions apply:					
	ha	nvironmental law means any federal, state, or loca azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clea	nto the air, land,	soil, surface wa	ater, groundwater		
		ite means any location, facility, or property as define used to own, operate, or utilize it, including dispo	•	vironmental law,	whether you now	own, operate, or utilize it	
		azardous material means anything an environment xic substance, hazardous material, pollutant, conta			aste, hazardous s	substance,	
Re		I notices, releases, and proceedings that you know	•		occurred.		
24.	Has	any governmental unit notified you that you r	may be liable o	r potentially lia	able under or in	violation of an environmental law?	
	H	No Yes. Fill in the details.					
			Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				
25		,		-lt:l(2		!
25.	пач	e you notified any governmental unit of any re	elease of nazar	dous materiai	f		
	님	No Yes. Fill in the details.					
			Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				

Debto	or 1	Christo Gase 16-16590 First Name			Entered 05/17 Page 52 of 75	1/11.6 (1/13:43: <u>38</u>	Desc Main
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include se			? Include settlements	and orders.			
	✓	No					
	ш	Yes. Fill in the details.	(Court or agency		Nature of the case	Status of the
		Case title					case
				Court Name			Pending
			_				On appeal
		Case number	ſ	Number Street			Concluded
			(City State	e Zip Code		
Part '	11:	Give Details About You	r Business or Co	onnections to A	ny Business		
27.	With	nin 4 years before you filed fo	r bankruptcy, did yo	u own a business or	have any of the follow	ing connections to an	y business?
		A sole proprietor or self-em	nployed in a trade, pro	fession, or other activi	ity, either full-time or part	-time	
		A member of a limited liabi A partner in a partnership	lity company (LLC) or	limited liability partner	rship (LLP)		
		An officer, director, or mana	aging executive of a c	orporation			
		An owner of at least 5% of	the voting or equity se	ecurities of a corporation	on		
		No. None of the above applies. (alow for each husiness			
	ш	Yes. Check all that apply above and fill in the details below			ture of the business		entification number Do not al Security number or ITIN.
						EIN:	al Security number of Trint.
		Business Name					
		Number Street		Name of accoun	ntant or bookkeeper	Dates busine	ess existed
		City State	Zip Code		·	From	То
				Describe the na	ture of the business		entification number Do not
						EIN:	al Security number or ITIN.
		Business Name				Liiv.	
		Number Street		Name of accoun	ntant or bookkeeper	Dates busine	ess existed
		City State	Zip Code		·	From	То
				Describe the na	ture of the business		entification number Do not
						EIN:	al Security number or ITIN.
		Business Name				2	
		Number Street		Name of accoun	ntant or bookkeeper	Dates busine	ess existed
		City State	Zip Code			From	То
				h			

Debtor 1		<u>d 05/ac7k16 Entered 05/1</u> 67/166/1k3k43: <u>38 Desc Main</u> ocumenter Page 53 of 75			
		give a financial statement to anyone about your business? Include all financial institutions,			
<u> </u>	No				
Щ	Yes. Fill in the details below.	Date issued			
	Name	MM/DD/YYYY			
	Number Street	_			
	City State Zip Code	_			
Part 12:	Part 12: Sign Below				
and c	correct. I understand that making a false statement,	ffairs and any attachments, and I declare under penalty of perjury that the answers are true concealing property, or obtaining money or property by fraud in connection with a prisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
Darik	•	X			
	/s/ Christopher Jackson Signature of Debtor 1	Signature of Debtor 2			
	Date 5/17/2016	Date			
Did y	ou attach additional pages to Your Statement of Fin	nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?			
✓ 1	No				
	No Yes				
		ney to help you fill out bankruptcy forms?			
Did y	res .	ney to help you fill out bankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice,			

	Case 16-1659	0 Doc 1 Filed (NE/17/16 E	Entorod 05/1	7/16 13:43:38	Desc Main	
Fill in this informa	ation to identify your case		1.3/11/110	Jueren (J.)/ I	7/10 13.43.30	Desc Main	
Debtor 1	Christopher	M	Jackson				
Debtor 2	First Name	Middle Name	Last Nam	ne			
(Spouse, if filing)	First Name	Middle Name	Last Nam	ne			
United States Ba	nkruptcy Court for the:	Northern	District of Illino				
Case number			(State)	:e)			
(If known)							
							if this is an ended filing
Official F	orm 108						
Stateme	nt of Intention	on for Individu	uals Filing	g Under C	hapter 7		12/15
•	ividual filing under cha e claims secured by yo	apter 7, you must fill out th	nis form if:		_		
	• •	and the lease has not expire	ed.				
		vithin 30 days after you file xtends the time for cause. `				•	
•	eople are filing togethe ust sign and date the f	er in a joint case, both are e form.	equally responsib	le for supplying c	orrect information.		

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: CNAC/MI105 Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 045 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Dobtor	Case 16-16590	Doc 1	Filed 05/17/16	Entered 05/17/16 13:43:38 Page 55 of 75 Page 55 of 75	Desc Main
Deptoi	Christopher	IVI	Documont	Dago EE of the number of	
1	First Name	Middle Name	e Last Nam	le known)	

any unexpired personal property lease that you listed in Schedule G: Executory Co rmation below. Do not list real estate leases. Unexpired leases are leases that are st xpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(ill in effect; the lease period has not yet ended. You may assume ar
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Lioncrest Homeowners Association	□ No ✓ Yes
Description of leased property: Landlord	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
3: Sign Below	

×	/s/ Christopher Jackson	×
	Signature of Debtor 1	Signature of Debtor 1
	Date 5/17/2016 MM/DD/YYYY	Date MM/DD/YYYY

B 203 (12/94)

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Christopher M Jackson	Case No.			
-	Debtor		(If known)		
		Chapter	Chapter 7		
	DISCLOSURE OF CO	MPENSATION OF ATTORNEY FOR DE	BTOR		
1.	compensation paid to me within one year b	ankr. P. 2016(b), I certify that I am the attorney for the abovenal pefore the filing of the petition in bankruptcy, or agreed to be paide debtor(s) in contemplation of or in connection with the bankrup	d to me, for services		
	For legal services, I have agreed to accept				
	Prior to the filing of this statement I have received				
	Balance Due				
2.	The source of the compensation paid to me	e was:			
	✓ Debtor	Other (specify)			
3.	The source of the compensation paid to me	e is:			
	✓ Debtor	Other (specify)			
4.	I have not agreed to share the above-omembers and associates of my law fit	disclosed compensation with any other person unless they are rm.			
		osed compensation with a other person or persons who are not n. A copy of the agreement, together with a list of the names of n, is attached.			
5.		ve agreed to render legal service for all aspects of the bankrupto	•		

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

	CERTIFICATION
I certify that the foregoing is a complete stathe debtor(s) in this bankruptcy proceedings.	tement of any agreement or arrangement for payment to me for representation of
5/17/2016	/s/ Elizabeth Placek

Signature of Attorney

Semrad Law Firm

Name of law firm

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Date

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Christopher M Jackson	Case No.	
	Debtor	PARTITION OF THE PARTIT	(If known)
		Chapter	Chapter 7
	DISCLOSURE OF COMPENSATION	ON OF ATTORNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of trendered or to be rendered on behalf of the debtor(s) in conte	he petition in bankruptcy, or agreed to be	e paid to me, for services
	For legal services, I have agreed to accept		\$1,415.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		\$1,415.00
2.	The source of the compensation paid to me was:		And the state of t
	Debtor Other (specify	y)	
3.	The source of the compensation paid to me is:		
	Debtor Other (specify	()	
4.	I have not agreed to share the above-disclosed compensation members and associates of my law firm.	ation with any other person unless they a	are
	t have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the agree the people sharing in the compensation, is attached.	with a other person or persons who are e eement, together with a list of the name	not s of
5.	In return for the above-disclosed fee, I have agreed to render a. Analysis of the debtor's financial situation, and renderir bankruptcy;		
	b. Preparation and filing of any petition, schedules, stater	nents of affairs and plan which may be r	equired;
	c. Representation of the debtor at the meeting of creditors	and confirmation hearing, and any adjo-	urned hearings thereof;

UNS

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

	CERTIFICATION
I certify that the foregoing is a complete stat the debtor(s) in this bankruptcy proceedings.	tement of any agreement or arrangement for payment to me for representation of
5/17/2016	/s/ Elizabeth Placek
Date	Signature of Attorney
Note that the state of the stat	Semrad Law Firm
	Name of law firm



CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1415.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Chris Jackson

In A Maria

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 5/17/2016		
Client /ng	Client	
Attorney Chabeth	Placeh)	
Allomey		

Initials CMO_____

Chris Jackson

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-16590 Doc 1 Filed 05/17/16 Entered 05/17/16 13:43:38 Desc Main UNITED STATES BANKBURG OF POURT Northern District of Illinois

In re:	Jackson, Christopher M Debtor(s)	Case No		
	.,	Chapter.	Chapter7	
	VERIFICATIO	N OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the a	ttached list of creditors is true a	nd correct to the best of their kno	wledge.
Date:	5/17/2016	/s/ Jackson, Christo		
		Jackson Christoph	r M	

Signature of Debtor

CNAC/MI105 3718 STADIUM DR KALAMAZOO , MI 49008 USA

FAIR COLLECTIONS & OUT 12304 BALTIMORE AVE STE BELTSVILLE , MD 20705 USA

KAHN SANFORD LTD 180 N LASALLE #2025 Chicago , IL 60601 USA

MED BUSI BUR 1460 RENAISSANCE D SUITE 400 PARK RIDGE , IL 60068 USA

STELLAR RECOVERY INC 4500 Salisbury Rd Ste 10 Jacksonville , FL 32216 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

Comcast Corporation 880 Donata Court Lake Zurich , IL 60047 USA

WORLD FINANCE CORPORAT W., 4318 211th St Matteson , IL 60443 USA

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057 USA

ERC 8014 Bayberry Road Jacksonville , FL 32256

US Cellular Dept 0205 Palatine , IL 60055 USA

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773 USA Case 16-16590 Doc 1 Filed 05/17/16 Entered 05/17/16 13:43:38 Desc Main Document Page 68 of 75

MCSI INC PO BOX 327 PALOS HEIGHTS , IL 60463 USA

Village of University Park 698 Burnham Drive University Park , IL 60484 USA

MCSI INC PO BOX 327 PALOS HEIGHTS , IL 60463 LISA

City of Country Club Hills PO Box 7690 Carol Stream , IL 60197 USA

HWARFIELD 4620 WOODLAND CORP TAMPA , FL 33614 USA

MIRAMEDRG 111 WEST JACKSON CHICAGO , IL 60604 USA

UNITED TRANZACTIONS 2811 CORPORATE WAY MIRAMAR, FL 33025 USA

HBLC 2615 3 Oaks Rd Cary , IL 60013 USA

Fink, Steven J. 25 E Washington St Ste 1233 Chicago , IL 60602 USA

National Credit Lenders 157 W 159th St Harvey , IL 60426 USA

Zingo Cash 200 Fairway Drive Vernon Hills , IL 60061 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA Case 16-16590 Doc 1 Filed 05/17/16 Entered 05/17/16 13:43:38 Desc Main Lending Corporation Document Page 69 of 75

Illinois Lending Corporation 2109 S. Wabash Chicago , IL 60616 USA

Nicor Gas 90 N. Finley Road Glen Ellyn , IL 60137 USA

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace, IL 60181 USA

Devon Financial Services 6414 N. Western Ave Chicago , IL 60645 USA

US Bank 425 Walnut Street Cincinnati , OH 45202 USA

Illinois Tollway PO Box 5544 Chicago , IL 60680 USA

IRS 1 PO Box 7346 Philadelphia , PA 19101 USA Case 16-16590 Doc 1 Filed 05/17/16 Entered 05/17/16 13:43:38 Desc Main Document Page 70 of 75

in 11 U.S.C. § 101(8) purpose." t you incurred to business or
purpose." t you incurred to business or
ients.
administrative expenses are
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0,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion a than \$50 billion
,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion than \$50 billion
mation provided is true
mation provided is true a, under Chapter 7, 11,12, chapter, and I choose to at an attorney to help me 342(b). cified in this petition. r property by fraud in ment for up to 20 years,
01-5 01-1 01-1 00,00 000,0 000,0 000,0 tha mat 342 ciffe

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		Docur	nent Page 71	of 75	
Fill in this infor	mation to identify your cas	se:			
Debtor 1	Christopher First Name	M	Jackson		
Debtor 2 (Spouse, if filin		Middle Name	Last Name		
	3) First ivame Bankruptcy Court for the:	Middle Name Northern	Last Name		
Case number	cannicpley court for are.	Notthern	District of Illinois (State)		
(If known)					granding:
Official	Form 106De	C			Check if this is an amended filing
Declara	tion About a	n Individual De	btor's Schedu	ıles	12/15
property by frai 1519, and 3571.	aa in Coimection will s	ile bankruptcy schedules or bankruptcy case can result i	amended schedules, Mak n fines up to \$250,000, or i	ing a false statement, concealing prop imprisonment for up to 20 years, or bo	perty, or obtaining money or oth. 18 U.S.C. §§ 152, 1341,
Did you pa	ay or agree to pay some	one who is NOT an attorney	to help you fill out bankru	ptcy forms?	A STATE OF THE STA
☑ No					
Yes. N	Name of person		Attach Bankruptcy P Signature (Official Fo	'etition Preparer's Notice, Declaration, and orm 119).	d
Under pen that they a	alty of perjury, I declare re true and correct.	that I have read the summar	y and schedules filed with	n this declaration and	
X /s/ Christo	pher Jackson	We are	×		

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1

MM/DD/YYYY

Date 5/17/2016

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Debtor 1	Christopher First Name	M Middle Name	Jackson	Case number (if known)
28. Wit	hin 2 years before ditors, or other par	you filed for bankruptcy, did y	Last Name ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
Z	No Yes. Fill in the detai			
Acceptage			Date issued	
	Name		MM/DD/YYYY	_
	Number Street		·· ····	
	City	State Zip Code	······································	
Part 12:	Sign Below			
and c	uptcy case can res	sult in fines up to \$250,000, or i	nt, concealing property, or mprisonment for up to 20 y	nts, and I declare under penalty of perjury that the answers are true obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signatu	ire of Debtor 1		Signature of Debtor 2
	Date :	5/17/2016 / X/		Date
Did yo V No Ye	0	l pages to Your Statement of	Financial Affairs for Indivic	luals Filing for Bankruptcy (Official Form 107)?
Did yo	u pay or agree to p	pay someone who is not an att	orney to help you fill out ba	inkruptcy forms?
N E				
L. Ye	s. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor Christopher	M	Jackson	Case number (if
1 First Name	Middle Name	Last Name	known)
সাধ্য List Your Unexpire	d Personal Property Lea	ases	
For any unexpired personal pro	perty lease that you listed in	Schodulo G: Evacutor: C:	ontracts and Unexpired Leases (Official Form 106G), fill in the
information below. Do not list re unexpired personal property lea			
Describe your unexpired pe	rsonal property leases		Will the lease be assumed?
Lessor's name: Lioncrest Ho			□ No ✓ Yes
Description of leased property: Landlord			Miles
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:		·	☐ No ☐ Yes
Description of leased property:			- Indiana - Indi
Lessor's name:			No Yes
Description of leased property:		The second secon	Seasoff 1
Lessor's name:			No Yes
Description of leased property:			Company Compan
Lessor's name:		en e	No Yes
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Sign Below	tit i til et si samten market market som en kenne manne general process som en e	er manner, en memoerspyrister kanterinke remoer kief stop men til gripp med kjør til frede i 1975 fre	has philosophing and the mark at the principle of the charge partition has a graph principle recognition and the principle and the partition of the principle and the principl
	are that I have indicated my in	tention about any propert	ty of my estate that secures a debt and any personal property
✗ /s/ Christopher Jackson	14	*	
Signature of Debtor 1		Signatu	ere of Debtor 1
Date 5/17/2016 MM/DD/YYYY		Date _ N	MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Jackson, Christopher M	A
	Debtor(s)	Case No.
		Chapter. Chapter7
	VERIFICA	ATION OF CREDITOR MATRIX
	The above named Debtors hereby verify that	t the attached list of creditors is true and correct to the best of their knowledge.
ate:	5/17/2016	/s/ Jackson, Christopher M
		Jackson, Christopher M Signature of Debtor

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Debtor 1	Christopher	М	Jackson	Case number (if known)		
	First Name	Middle Name	Lasi Name	-		
				Column A Debtor 1	Column B Debtor 2 or	•
8.Unem	ployment compensation			ėn no	non-filing spouse	
Do no	t enter the amount if you contend the Security Act. Instead, list it here:	nat the amount received v	vas a benefit under the	\$ <u>0.00</u> e		
	W U	•	0.00			
	our spouse	-	0.00			
9. Pensi d benefit	on or retirement income. Do not tunder the Social Security Act.	include any amount rece	ived that was a	\$ <u>0.00</u>		
receive	ne from all other sources not li tinclude any benefits received und ed as a victim of a war crime, a cri stic terrorism. If necessary, list othe slow.	er the Social Security Ac	t or payments			

Total a	mounts from separate pages, if an	y .		+\$0.00	+	
11. Calcu colui	ulate your total current monthly mn. Then add the total for Column	income. Add lines 2 the A to the total for Column	ough 10 for each B.	\$2,959.12 +		= \$2,959.12
				<u> </u>		Total current
	Nadammata - 1875					monthly income
Part 2: [12 Calcul	Determine Whether the Me ate your current monthly incom	eans Test Applies	o You			
	opy your total current monthly incor		iese steps:			
	fultiply by 12 (the number of month			· ·	11 here →	\$2,959.12
	ne result is your annual income for				12b.	X 12
	·	,			120.	\$35,509.44
13 Calcula	ite the median family income th	at applies to you. Folio	w these steps:			
Fill in th	e state in which you live.		Illinois			
Fill in th	e number of people in your housel	nold.	5			
Fill in th	e median family income for your st	ate and size of househo	rl		40	
To find a	a list of applicable median income ons for this form. This list may also	amounts ao onlina vein	the link appoind in t	the separate		\$95,321.00
4. How de	o the lines compare?	be available at the pank	ruptcy clerk's office.			
14a. 🗸	Line 12b is less than or equal to I Go to Part 3.	ine 13. On the top of pag	e 1, check box 1, The	ere is no presumption of abuse.		
14b.		the top of page 1, check		ion of abuse is determined by Form 12	2 A- 2.	
anta: S	ign Below					
	i i					
By sign	ing here, I declare under behalty o	f perjury that the informa	tion on this statement	and in any attachments is true and \propto	orrect.	
🗶 is	/ Christopher Jackson		×			:
*****	nature of Debtor 1	7	-	Signature of Debtor 2		
Пэt	e 5/17/2016	/		-		
vai	MM/DDYYYY /	1	[.	Date 5/17/2016 MM/DD/YYYY		4
	£			WHANDOLL L. L.		1
If you If yo⊔	checked line 14a, do NOT fill out checked line 14b, fill out Form 12	or file Form 122A-2. 2A-2 and file it with this fo	orm.			